

# PARTNERS

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## V3 HPAS is coming – will you be ready?

With Solutions Design well underway in the V3 HPAS project, we are beginning internal interface discussions on what will be required of payroll locations to effectively support this project and make maximum utilization of the automation features of the new system.

V3 HPAS is the interactive eligibility system for the State Health Benefit Plan that will

empower the employer payroll locations and eligible employees.

With this system, members will have the ability to make a number of elections/changes on the web. Some of these changes include the ability to enroll for health coverage, correct addresses, and make changes based on qualifying events.

Employees and employers will be able to

view eligibility information 24 hours a day 7 days a week.

The new system is a comprehensive web based system that will hold employee and health deduction data.

As part of its comprehensive structure, the system will maintain all eligible State Health Benefit Plan (SHBP) employees' data, whether

... continued on Page 2

### INSIDE THIS ISSUE:

Dependent Driven Coverage Tiers	2
Items to address in the new system: Flex Non-Flex	3
Useful Contact Information	4

### SPECIAL POINTS OF INTEREST:

- Items to address in the new system...see page 3
- Employee/employer tradeoffs...see page 2

### Employer Payroll Location

SHBP will continue to bill employer payroll locations on a monthly basis for health coverage for their employees.

The bills that will be generated out of V3 HPAS will provide details of current month and prior month period balances at

the employee level. This detail will enable SHBP staff or the payroll location's Benefits Coordinator to identify potential discrepancies between payroll systems and the employee coverage information maintained in the HPAS system.

Any discrepancies will automatically suspend the employee coverage until the differences can be resolved.

That's why it will be imperative for you, the employer, to insure your employees are enrolled in  
... continued on Page 4

## Monthly Billing Statements

# Dependent Driven Coverage Tiers

As most of you are aware, the employee currently selects tiers during enrollment.

In the new V3 HPAS system, tiers will be driven by the dependents the employee selects for coverage.

For example, if I select only myself for coverage, then the system will map me to the Single coverage premium.

Likewise, if I elect to cover my spouse or children, then the system will map me to the Family coverage premium.

This method conforms to IRS 125 rules in that it only allows

employees to elect those pre-tax health benefit deductions for which they are truly eligible.

However, members must insure that their dependents, particularly overage dependents with Fulltime Student Status, are documented in a timely manner to avoid inadvertently changing coverage tiers.

For example, if my 19-year-old child and I are the only individuals on my policy and I fail to document student status when required, the system will drop coverage on my child (based on

SHBP eligibility rules) and adjust my tier and premium to reflect Single coverage.

Late documentation, in addition to creating gaps in coverage, will result in potential confusion regarding premiums and billing records.

The new system provides for greater empowerment of employers and employees, but the tradeoff is that employees must be responsible for providing accurate information that potentially affects their coverage for themselves and their dependents in a timely manner.

## V3 HPAS is coming – will you be ready?

*...Continued from Page 1*

enrolled or not, and all of their health deduction data. This is different from our current system which is limited to only actual enrolled employee data.

What does this mean to employers?

Interfacing.

The goal for payroll interface design completion is July 2005.

Testing will occur in August and September.

In order to interface employee data into the HPAS system, we will require that all non-Flex employers

(not participating in the Georgia Merit System Flexible Benefits Program) send monthly

(MPPI) format that many locations are already familiar with.

For all Flex employers, there will be an interface through the Georgia Merit System and additional interfacing from Flex employers may not be required.

Interfaces will enable you, the employer, to better control employee paid premiums to more accurately reflect actual coverage for an employee and their dependents.

For the SHBP, it will allow maintenance of complex coverage rules and the ability to keep up to date information.

***Within the next month, individual employer payroll locations will be asked to provide a contact person for interfaces and testing.***

See:

**“Items to Address”**

on Page 3

Interfacing will give employers the ability to import and export data directly with the HPAS web application by sending files securely over the Internet.

interfaces of payroll data and more frequent interfaces of eligible employees.

These interfaces will be in the Multi-Purpose Payroll Interface

# V3 HPAS is coming – will you be ready?

## Items to address for the new system:

### **EMPLOYERS PARTICIPATING IN THE GMS FLEXIBLE BENEFITS**

1. If you have a high volume of activity, will your current Internet server and speed be able to handle the volume?
2. The HPAS system technical requirements are Internet Explorer 6.0 or above or Firefox 1.0 or above. These requirements should be reviewed and/or forwarded to your IT Department or senior management team.
3. Did mandatory web elections during this Open Enrollment go well for your location?
  - A. Did your employee enter their elections or did you do the entry for them?
  - B. Did you make special arrangements to accommodate Open Enrollment?
  - C. If you did entry for your employees, are you going to assume this responsibility in the future or empower your employees?

### **EMPLOYERS NOT PARTICIPATING IN GMS FLEXIBLE BENEFITS**

1. If you have a high volume of activity, will your current Internet server and speed be able to handle the volume?
2. The HPAS system technical requirements are Internet Explorer 6.0 or above or Firefox 1.0 or above. These requirements should be reviewed and/or forwarded to your IT Department or senior management team.
3. If your location does not currently share data with SHBP for reconciliation and creation of a comparison report which can be retrieved from View Direct, contact Support Services for the MPPI interface layout. This layout allows the exchange of data between SHBP and your payroll/HR system. This exchange will reduce the amount of information you will enter in the V3 HPAS system. Implementation of the interface prior to the conversion, will allow you to resolve coverage and payroll discrepancies and make a smoother transition when V3 HPAS goes live.
4. If you sent a MPPI eligibility file for Open Enrollment, have you discovered any problems with the membership worksheets you received?
  - A. Did you get worksheets for all eligible employees?
  - B. Did you get worksheets for non-eligible employees?
  - C. Were the worksheets sorted by the correct Unit/Location?

If you experienced any of these problems, you should review the layout of information in the MPPI file and make any corrections prior to the fall Open Enrollment.

**Take this opportunity to get involved.**

**Early involvement will make the transition to the new system much easier for you and for us!**

# Monthly Billing Statements ... Continued from page 1

the correct options and that they are having the correct amount regularly deducted from their paycheck for their health insurance coverage.

In order to assist you with this task, the new system will have the ability to create “proof list bills”, which are real-time snapshots of the “final list bill” for the next month’s coverage. This proof bill will capture all transactions that have been processed in the system since the last final bill was generated. Billing amounts are calculated based on current and retroactive transactions.

Final bills will be available electronically for download by the payroll locations. We are looking for each of you to provide us with an electronic interface file

containing individual subscriber premium deduction amounts.

This interface will be loaded to the system in order for the electronic reconciliation to be performed on the comparison of individual subscriber amounts expected to the actual amounts that were deducted.

It is expected that the employee deduction amounts remitted from the payroll location should coincide with the total amount on the interface file.

Employers are required to pay as billed with no adjustment.

Any necessary coverage corrections will appear on your next proof and final bills.

## STATE HEALTH BENEFIT PLAN

### USEFUL CONTACT INFORMATION

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